

## Delaware Trauma System Committee Meeting

Public Health Training Center    Dover    Delaware

**December 6, 2017      12:30 – 2:00 PM**

**Members Present:** S. Carey\*, S. Elwell\*, J. Giraldo\*, D. Cloney, M. Jadali\*, D. Jones\*, R. Mauch\*, J. Baxley\*, S. Raab-Long\*, R. Tatineni\*, K. Collison, J. Brennan, E. Alexander\*, D. Eberly\*

**Alternates/Guests Present:** K. Bradley\*, C. Faedke\*, S. Gibney\*, M. Griffin\*, B. King\*, D. Matwiejewicz\*, J. McCue, D. Sofia\*, J. Whaley\*, M. Pragg\*, M. Mitchell, M. LeNoir, S. Snyder, P. Woods, T. Ketterman, M. Williams, K. Boyer, D. Riley, C. Faulkner, J. Hammond\*, K. Abbrescia", N. Tyndal (phone), D. Curtis (phone)

**Staff Present:** B. Huss\*, M.S. Jones\* , R. Megargel, S. Murphy\*, M. Neumann\*, M. Cipolle\*

\*Attended Quality Meeting

<u>Topics</u>	<u>Discussion Leader</u>	<u>Information/Action Plan</u>
<b>I. Welcome and Introductions</b>	S. Murphy	The meeting was called to order at 12:30 p.m. Introductions were made.
<b>A. Minutes</b>	S. Murphy	The previous meeting minutes were accepted as written.
<b>II. New Business</b>		
<b>A. Delaware Medical Surge Planning, Trauma/ Burns</b>	M.S. Jones	Update- A workgroup of volunteers has been formed to plan for this initiative. Anyone interested is welcome to help. The overall goal of this phase is to ‘Expand the capacity and capability of the Delaware Trauma System to respond to a sudden surge of traumatically injured or burned patients.’ This will be a multi-year project. Trauma System Registry data shows an average of 22 trauma patients are admitted per day to Trauma Centers statewide, gives us a starting point for planning.
<b>IV. Unfinished Business and Reports</b>		
<b>A. Unfinished Business</b>		
<b>1. Trauma System Funding Legislation -Next Steps</b>	M. Cipolle	Bishop & Associates submitted a proposal but no response has been decided upon, nor has any funding source been identified. They have successfully worked with other states to obtain trauma system funding (100% success rate/10 states) and provided a cafeteria-type work plan where components of the proposal could be chosen. Dr. Cipolle has discussed this with the ACS legislative team and they are interested in discussing further. Four action steps were developed when TSC members met with the Delaware Healthcare Association Policy Committee in April 2016: 1) Perform a Trauma System fiscal needs assessment and/or gap analysis to identify specific system areas in need of support; 2) Develop a more accurate method of determining trauma-related hospital costs; 3) Review information on ways other states are funded and how they distribute the funds; 4) Move the anniversary event to the Fall so that more legislators may attend and be made aware of what the Trauma System has accomplished- done. Needs identified in the trauma/burn surge initiative could possibly help move this initiative forward, given the importance of preparedness efforts and the degree of support there is for them.
<b>B. Trauma System Designation Committee Report</b>		
<b>1. 2017, 2018 site visits</b>	M. Mitchell	Saint Francis Healthcare and Bayhealth Milford both received one-year verification as Level 3 Trauma Centers from the American College of Surgeons and will be able to extend the timeframe to three years with submission of some documentation. Beebe Healthcare and Wilmington Hospital had October visits. Beebe received full three year

		verification and Wilmington is still waiting for their report. A Designation Committee meeting is being scheduled. Bayhealth Kent General and Christiana will have site visits in the fall of 2018.
<b>C. Trauma System Quality Evaluation Committee Report</b>		
1. Trauma System Registry  2. Data • Research Projects	----  M. Cipolle	No report  Current research is continuation of the duPont ATV data review. Dr. Braverman, with M. Neumann, Dr. Cipolle, and the Value Institute, has completed his Trauma System Registry review of geriatric trauma patients, covering 15 years (in 5-year groupings) and stratifying by ISS. Results showed a decrease in length of stay and mortality rate consistently through the System. Analysis by ISS groups showed the same improved results, as did analysis by severity of brain injury. Hip fractures showed the same tendencies but were not statistically significant. Analyses on factors associated with repeat admissions done on CCHS Trauma Registry data (10,000 patients over 6-7 years) showed these factors to be female, Caucasian, anemia, subdural hematoma (the only injury identified), and discharge to skilled nursing facility or home with services. Mean readmission time was 424 days, indicating new injuries. The paper won second place at the COT Region 3 Resident Trauma Paper Competition. Dr. Braverman will present his research at a future TSC meeting. This research will allow more focus on patients who may be at risk of reinjury. Some patients had as many as 8 repeat injuries.
<b>D. Networking Highlights</b>		
1. State EMS Medical Director	R. Megargel	Review of standing orders cycle is beginning.
2. Office of EMS	B. Huss	The Stop the Bleed trainer manikin (leg) is available to be borrowed from the Office of EMS for use in classes.
3. PH Preparedness	----	No report
4. Highway Safety	-----	No report
5. Injury Prevention	J. McCue  K. Collision  K. Boyer  J. Whaley	<ul style="list-style-type: none"> <li>A car seat child passenger safety technician training program is being offered in February by Safe Kids Delaware. Classes will be held in New Castle County on four consecutive Wednesdays and there are spaces available.</li> <li>Jen is working with the Westside Clinics to provide classes for expectant mothers. She will be expanding to include some downstate agencies such as La Red in Georgetown. She is available to add other programs as long as they are within the Nemours catchment area, which includes all of Delaware.</li> <li>Safe Kids New Castle County is providing Clifford books on water and pedestrian safety to libraries and schools.</li> <li>The Office of Rural Health is interested in developing a second Amish safety enhancement project. In 2002 there was a successful collaboration among Rural Health, Bayhealth Kent General, DelDOT, DPH nursing, Hartly Fire Department, Kent County EMS, Office of Highway Safety, State Police, and Office of EMS, resulting in purchase of yellow strobe lights for Amish buggies, development of a brochure for the public on safe driving in Amish areas, and signs with the same message. There have been two crashes recently, with one fatality. A meeting will be in January.</li> <li>Kathy is continuing to take the Think First program into schools, with more schools expressing interest in it.</li> <li>There is a <i>Think First to Prevent Falls</i> program that Kathy has been taking into the community as well as providing it at Christiana and Wilmington Hospitals. There are 1-hour and a 2.5-hour version and Kathy is starting some research comparing the two. When A Matter of Balance classes are full, Kathy is often able to offer the Think First falls prevention program to interested persons.</li> </ul>

	K. Boyer	<ul style="list-style-type: none"> <li>• Pedestrian and bicycle incidents are a concern in Sussex County. Some traffic light and lighting measures have been taken, and reflective items are also being considered.</li> <li>• Use of electronics is a big problem, and research shows that devices are still distracting, even if not handheld. The distraction simulator is a good tool to help people realize this.</li> </ul>
6. DE Chapters ACS Committee on Trauma, American Trauma Society	S. Murphy K. Bradley  M.S. Jones	<p><b>ACS-COT/ATS:</b> An ATLS 10<sup>th</sup> Edition new instructor course was held at CH. An instructor update is being offered in January. The revised course has major revisions that increase interactivity.</p> <p>The Stop the Bleed course continues to be emphasized by the ACS COT. The Las Vegas ATLS faculty participated in the last ACS COT meeting. They did an excellent job during the crisis.</p> <p>It is anticipated that grants from the Delaware Chapter ATS will again be given in 2018 for injury prevention projects.</p>
7. DEMSOC	S. Murphy, R. Megargel	The opioid crisis continues to be a large part of the meeting's discussion, particularly how EMS will evolve to meet the demand. Chief Tan had suggested a "Systems of Care" approach be utilized, and movement is occurring toward implementation of that approach. The next DEMSOC meeting will be next week, December 13.
8. DPH Rural Health	K. Collison	The next year's grant award has been received and will continue to provide some support for Trauma System Committee.
9. Organ/Tissue Donor AwarenessBrd	J. Hammond	The Delaware Donor Dash was held on September 23 at the Nemours Estate on Rockland Road in Wilmington, to raise public awareness about the importance of organ donor designation.
10. TSC Agencies 1. 911 Dispatch  2. Suzanne RaabLong	D. Jones	<p>1, State dispatch agencies are working on a statewide policy on their response to text messages for emergency assistance that are received in the 911 Centers. Questions will have to be more brief, and the texters will be asked to call 911 if they are able so more information can be exchanged, including pre-arrival instructions.</p> <p>2. Suzanne announced her retirement on February 9, 2018 after many years on Trauma System Committee, Quality Committee, and Designation Committee. She will be missed!</p>
V. Adjournment	S. Murphy	The meeting was adjourned at 2:30 PM.
<u>Next Meeting</u>		<b><u>Thursday, March 22, 2018 @12:30, Public Health Training Center, Edgehill Shopping Center, Dover</u></b>